| • | | | | | | Application or Docket Number | | | | | | | |
|--|--|---|---------------|---|------------------|------------------------------|-------------------|------------------------|-------------------------------|---------------------|------------------------|--|--|
| | PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001 | | | | | | | D/0028// | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | SMAL TYPE | SMALL ENTITY TYPE | | OTHER THAN OR SMALL ENTITY | | | | |
| TOTAL CLAIMS | | | 40 | | | RAT | RATE FEE | | | RATE | FEE | | |
| FOR | | | NUMBER FILE | D NUM | BER EXTRA | BASIC FEE | | 370.00 | OR | BASIC FEE | | | |
| TOTAL CHARGEABLE CLAIMS | | | 40 minus | 20= * | 20 | X\$ 9= | | | OR | X\$18= | 361.∞ | | |
| INDEPENDENT CLAIMS | | | 6 minus 3 = * | | 3 | X42= | | | OR | X84= | 252.00 | | |
| MU | LTIPLE DEPEN | IDENT CLAIM PI | RESENT | | | +14 |)= | | OR | +280= | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TOTAL | | OR | TOTAL | 1357,00 | | | |
| Column 1) (Column 2) (Column 3) | | | | | | | | ENTITY | OR | OTHER SMALL | THAN | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RAT | E. | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| NON | Total | · 40 | Minus + | .40 | =7 | X\$ 9 |)= | | OR | X\$18= | | | |
| AME | Independent | * U | | HAT CLAIR | = | X42 | != | | OR | X84= | | | |
| | rinoi Priese | MINIONOFM | JUITUE DEPER | ADEINI OLAIR | " | +14 |)=. | | OR | +280= | | | |
| | | | | | | TC ADDIT. | TAL | | OR | TOTAL ADDIT, FEE | | | |
| | | (Column 1) | | (Column 2) | (Column 3) | ADOI1. | | | | | | | |
| ENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RAT | Έ | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| AMENDMENT B | Total | * | Minus * | r it | = | X\$ 9 |)= | | OR | X\$18= | | | |
| | Independent | * | 1 | HAR UDENT CLAIR | = | X42 | = | | OR | X84= | | | |
| <u> </u> | PHESE | ENTATION OF MI | ULITPLE DEPEN | ADENI CLAIN | л <u>.</u> | +140 |)=. | | OR | +280= | | | |
| | | | | | | ADDIT. | TAL | | OR | TOTAL ADDIT, FEE | | | |
| | | (Column 1) | | (Column 2) | (Column 3) | הטטוו. | · CE I | | | AUDII, FEE | | | |
| ENTC | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RAT | E | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| AMENDMENT C | Total | * | Minus * | nt · | e | X\$ 9 |)= | | OR | X\$18= | | | |
| | Independent | • | | tek | = | X42 | _ | | OR | X84= | | | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | .000 | | | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

ADDIT. FEE